

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Carl D. NEUBURGER

Atty Docket No. 81069/305991
– Dkt. 4 DIV2

Application No.: **Division of**
Appln. No. 10/051,150

Group Art Unit: UNKNOWN

Filed: September 30, 2003

Examiner: UNKNOWN

Title: ADHESIVE TRANSFER DEVICE

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September 30, 2003

INFORMATION DISCLOSURE STATEMENT

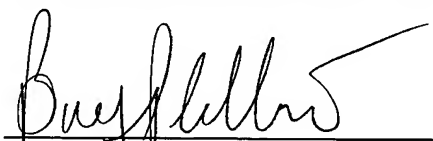
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Attached is Form PTO-1449 listing all of the documents cited by Applicants and the PTO in the parent application No. 10/051,150 relied upon under 35 USC §120. Pursuant to Rule 98(d), copies of these documents are not required now.

Please consider these documents and advise that they have been considered in this new application as by returning a copy of the enclosed Form PTO-1449 with the Examiner's initials in the left column per MPEP 609. .

Respectfully submitted,
PILLSBURY WINTHROP LLP



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| Atty. Dkt. No. | M# | Client Ref. |
| | 305991 | 4 DIV2 |

**INFORMATION DISCLOSURE STATEMENT
BY APPLICANT**

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|---------------------------------|-------------------------|
| Applicant: Carl D. NEUBURGER | |
| Appln. No.: TO BE ASSIGNED | |
| Filing Date: September 30, 2003 | |
| Examiner: Unknown | Group Art Unit: Unknown |

Date: September 30, 2003 Page 1 of 2

U.S. PATENT DOCUMENTS

| Examiner's Initials* | | Document Number | Date MM/YYYY | Name (Family Name of First Inventor) | Class | Sub Class | Filing Date (if appropriate) |
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| | | | | | | Enclosed | No | Enclose | No |
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OTHER (Including in this order Author, Title, Periodical Name, Date, Pertinent Pages, etc.)

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| Examiner | Date Considered: |
| <p>*EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.</p> | |

Atty.
Dkt. No.

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Examiner: Unknown

Group Art Unit: Unknown

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| | QR | 5,876,817 | 03/1999 | MATHNA et al. | | | |

FOREIGN PATENT DOCUMENTS

| | | Document Number | Date MM/YYYY | Country | Inventor Name | | English Abstract | | Translation Readily Available | |
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| | | | | | | | Enclosed | No | Enclose | No |
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| | YR | | | | | | | | | |

OTHER (Including in this order Author, Title, Periodical Name, Date, Pertinent Pages, etc.)

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| | CCR | | | | | | | | | |
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Examiner

Date Considered:

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